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Jim-

This was mailed on 9-18
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Thanks.

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PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF
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Application Number	10/827,021
Filing Date	4/19/2004
First Named Inventor	RICHARD D. SCHWARZ
Art Unit	3694
Examiner Name	SHARON MERCHANT
Attorney Docket Number	114129-121053

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

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☐ I hereby appoint the practitioners associated with the Customer Number:

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OR


<input checked="" type="checkbox"/> Firm or Individual Name	BRAD PINES		
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	BRAD PINES		
Date	9/17/2007	Telephone	734-904-9456

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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